

BRISTOL BAY TELEPHONE COOPERATIVE, INC.
EMPLOYMENT APPLICATION

Employer Information

Employer: Bristol Bay Telephone Cooperative, INC.
Address: PO Box 259
City/State/ZIP: King Salmon, Alaska 99613
Telephone: 907-246-3403

It is the policy of Bristol Bay Telephone Cooperative, INC. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

Applicant Information

Applicant Full Name: _____
Home Address: _____
City/State/ZIP: _____
Number of years at this address: _____
Daytime Phone: _____
Evening Phone: _____
Mobile Phone: _____
Social Security Number: _____
Drivers License (State/Number): _____

Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: _____
Relationship to you: _____
Address: _____
City/State/ZIP: _____
Daytime Phone: _____
Evening Phone: _____

Job Position Applied For: _____

Full or Part Time: _____

Salary Desired: \$ _____ per _____

Are you willing to work any shift, including nights and weekend? ____ Yes ____ No

If no, please state any limitations:

If applicable, are you willing to work overtime? ____ Yes ____ No

If you are offered employment, when would you be available to begin work?

If you are offered employment, when would be available to begin work?

Have you ever been convicted of a felony or misdemeanor (excluding any sealed or expunged convictions)?

____ Yes, I was convicted of _____ on _____ (date) in _____ (city),
_____ (state)

___ No.

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

Applicant's Skills

List any skills that may be useful for the job seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

| Skill | Years of Experience | Level of Proficiency |
|-------|---------------------|----------------------|
| | | |
| | | |
| | | |

Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the more recent, and list and explain any abs in employment. If additional space is needed, continue on the back page of this application.

Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/ZIP: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month / Year): _____

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Supervisor Name: _____
Address: _____
City/State/ZIP: _____
Job Duties: _____
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Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/ZIP: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month / Year): _____

Education and Training

| | Name and Address | Did you receive a degree? |
|--------------------|------------------|---------------------------|
| High School | _____ | _____ |
| College/University | _____ | _____ |
| Other Trainings | _____ | _____ |

Professional Licenses of
Certificates that you hold:
Awards, Honors, or
Special Achievements:

References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize BRISTOL BAY TELEPHONE COOPERATIVE, INC. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as reference to fully and freely communicate information regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE